

LINDA LINGLE
GOVERNOR



CHAD K. TANIGUCHI
EXECUTIVE DIRECTOR

STATE OF HAWAII
DEPARTMENT OF HUMAN SERVICES
HAWAII PUBLIC HOUSING AUTHORITY
1002 NORTH SCHOOL STREET
POST OFFICE BOX 17907
Honolulu, Hawaii 96817

BARBARA E. ARASHIRO
EXECUTIVE ASSISTANT
IN REPLY PLEASE REFER TO:
09:CPO/468

October 5, 2009

TO: Interested Parties

FROM: Rick T. Sogawa
Acting Procurement Officer

SUBJECT: Information-For-Bids No. FMO-2009-27, Addendum No. 3
Furnish Accounting Services to Assist the HPHA's Fiscal Management Office

This Addendum No. 3 is to revise the procurement timeline as follows:

1. Revised Procurement Timeline:

<u>Activity</u>	<u>Scheduled Dates</u>
Public notice announcing IFB	September 24, 2009
Distribution of bid specs/bid form	September 24, 2009
Bid submittal deadline	October 7, 2009
Bid Opening	October 7, 2009
Notice of award	October 2009
Contract execution	October 19, 2009
Contract start date	October 19, 2009

Sealed bids are due no later than 10:00 a.m. on Wednesday, October 7, 2009.

2. Bid Form Attachment 2b replaces original Bid Form Attachment 2a issued on 9/30/09.
See Attachment 2b.

If you have any questions, please call contact Rick Sogawa, IFB Coordinator at 832-6038. Thank you for your attention to this matter.



IFB FMO-2009-27

SEALED BID

Hawaii Public Housing Authority
Contract and Procurement Office
1002 North School Street, Bldg. D
Honolulu, HI 96817

The undersigned has carefully read and understands the terms and conditions specified in the Sealed Invitation for Bid, Specifications and the General Conditions by reference made a part of this Bid and hereby submits the following offer to perform the work specified.

That the undersigned further understands and agrees that by submitting this Sealed Bid, 1) it is declaring its Bid is not in violation of Chapter 84, Hawaii Revised Statutes, concerning prohibited State contracts, and 2) it is certifying that the price(s) submitted was (were) independently arrived at without collusion.

Date: _____

Respectfully Submitted,

Telephone No.: _____

Legal Name of Offeror

Fax No.: _____

Payment address, if other than street
address at right:

Authorized Signature (Original)

Title

Hawaii General Excise Tax Lic. I.D. No.:

Street Address

Social Security or Federal I.D. No.:

City, State, Zip Code

Offeror is: ☐ Individual ☐ Partnership ☐ Corporation ☐ Joint Venture

State of Incorporation: ☐ Hawaii *☐ Other _____

*If "other", is corporate seal available in Hawaii? ☐ Yes ☐ No

Bidder's Office
Address: _____

Name of Person to Contract: _____

Due Date: October 7, 2009 10:00 a.m. HST

Telephone Number: _____

Fax Number: _____

Insurance coverage to be provided by:

Commercial General Liability: _____

Name of Agent: _____

Telephone Number: _____

Workers Comp: _____

Automobile Insurance: _____

Signature of Offeror _____

Due Date: October 7, 2009 10:00 a.m. HST

	October 19, 2009 to October 18, 2010			Total Estimated Bid Price for the 12-month period (10/19/09 - 10/18/10)
	Estimated No. of Hours	x Bid Price Per Hour	= Total Estimated Bid Price	
1. Accountant III	1,984	x \$	= \$	\$
2. Accountant III	1,984	x \$	= \$	\$
3. Accountant III	1,984	x \$	= \$	\$
4. Accountant IV	1,984	x \$	= \$	\$
5. Fiscal Officer	1,984	x \$	= \$	\$
	TOTAL			\$

The low bid shall be determined based on the TOTAL bid price for the 12-month period.